Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10675608

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					(COIQITIT 2)		ŕ			OR I I			
			107		Service .			RATE			RATE	FEE	
FOR			NUMBER FILED		NUMBI	ER EXTRA	٤	BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			(6 7minus 20=		* 87			X\$ 9=		OR	X\$18=	1566	
INDEPENDENT CLAIMS			(minus 3 = 1		6	6		X42=		OR	X84=	104	
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in colu			olumn 2	L	TOTAL		OR	TOTAL	2820.	
CLAIMS AS AMENDED - PART II											OTHER		
		(Column 1)	(Column 2			(Column 3) SMAL		SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	Minus *** ILTIPLE DEPENDENT				X42=		OR	-X84=-		
L	TINOT FRESE	NIATION OF MI	OLTIPLE DEP	LINDEN	CLAIM			+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	HEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un			
								+140=		OR	+280=		
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)			•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=]	X42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┇┝			OR			
_	If the service of				- 40" '	1 6		+140=		OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er four	nd in the app	oropriate bo	x in co	lumn 1.		